

CITY AND COUNTY OF NORWICH




**School**

**Health**

**Service**

**1969**



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REPORT OF THE  
PRINCIPAL SCHOOL MEDICAL OFFICER

SCHOOL HEALTH  
SERVICE

## INTRODUCTION

I have the honour to submit the Annual Report on the School Health Service for the year 1969. This is the 62nd Annual Report of the Principal School Medical Officer for the City of Norwich.

### School Children on Register

The number of children on the register at the end of the year was 20,310. This compares with 20,170 at the end of 1968. The highest figure between the world wars was 19,655 in 1933 and the highest since 1939/45 was, of course, that of the famous bulge year—20,574 in 1961.

### Minor Ailment Clinics

There has been no change in the staffing pattern of these since last year.

The overall number of warts treated has not significantly changed.

### Ear Conditions

The number of cases of Otorrhoea known by us to have received treatment shows no change at 38. This, of course, compares with the three-figure numbers of the inter-war years.

### Audiometry

1,923 infant school children had their hearing tested in 1969 of whom 193 (10%) were referred to one of the doctors on the staff for further testing. 79 of these were ultimately referred to the Ear Nose and Throat Consultant, who recommended as follows:—

For Operative Treatment (Myringotomy, Removal of Tonsils and Adenoids, etc.)	.. ..	45
For treatment of Otorrhoea and Retesting Later	..	7
For Observation Only (Perceptive deafness)	..	14
Within Normal Limits—Review again later	..	10
Within Normal Limits—Discharged	.. ..	3

### Cleanliness

Of 52,511 examinations of children made in schools during the year (38,706 in 1968) 30 boys and 47 girls in 58 families were found to be infested, representing only 0.38% of the total school population. This compares with the figure of 0.46% for 1968 which was itself a decrease on the preceding year and has to be compared with the last available national figure of 2.54%.

### Speech Therapy

It is gratifying to be able to report that the vacancy for a Speech Therapist created by the officer accompanying her husband to another part of the country was filled during the year.



**Child Guidance Clinic**

The number of new cases seen at the Child Guidance Clinic last year was 76, this compares with the following figures for the preceding years.

1968—60  
1967—71  
1966—94

The number of new cases of Juvenile Delinquency seen at the Clinic was 4 which compares with the following figures for previous years.

1968— 6	1965— 2
1967— 2	1964— 1
1966—14	1963—11

It would seem possible that children are attending the Clinic at an earlier age and it is to be hoped that this will tend to decrease the cases of juvenile delinquency. This younger age at attendance, particularly of pre-school children is to be attributed to improved transport arrangements inaugurated during the year, as mentioned on Page 27.

**School Dental Service**

On Page 29 the Principal School Dental Officer, Mr. Christensen, reports on the School Dental Service. The dental staffing position is still somewhat precarious but we are much better off relatively than many authorities. We have three whole-time and the equivalent of one dental officer, part-time. Both to keep abreast of current medical and dental opinion and to have the greatest possible use of available dental skill, a specialist anaesthetist is employed for either one or two sessions per week as required to save Dentists having to give anaesthetics.

I would like to echo Mr. Christensen’s comment on the number of teeth extracted “not a very bright reflection on the dental condition of the school children”. I wonder what the figure would have been if fluoridation had been introduced when first recommended here many years ago.

**Infectious Diseases**

1968 saw the introduction on a limited scale of measles vaccination. Owing to the shortage of vaccine only 1,399 were vaccinated by the end of the year and 371 cases of measles were notified. Last year the vaccine was in even shorter supply and only 912 were vaccinated. 74 cases of measles in school children were notified during the year.

At the moment of writing we are on the threshold of vaccination against Rubella.

### **B.C.G. Vaccination**

Last year I felt it necessary to comment on the percentage of parents accepting the testing and, if necessary, the B.C.G. vaccination for the 13-year old children. The figure was 77·61 % which compares with 83 % in 1965. I repeat what I said then that although tuberculosis is virtually conquered it can never be eliminated and indeed with greater travel from abroad and despite medical control of immigrants, cases will tend to occur. As the number of cases in the community falls so will the herd immunity fall unless it is boosted by B.C.G. vaccination. The percentage of positive reactors fell somewhat, the 13-year old 3·5 % compared with 6·56 % in 1968 and 5·3 % in 1967, while amongst the older children the figure was 4·0 % which compares with 7·57 % and 6·4 % respectively.

### **Handicapped Pupils**

During 1968 5 boys and 4 girls (city children) were admitted to the Physically Handicapped School, and during 1969 9 boys and 6 girls. The conditions occasioning admission were as follows:—

Boys	Girls
Spina Bifida (2 boys)	Transverse Myelitis
Incomplete Vault of Skull (post fracture)	Bronchiectasis
Haemophilia	Spastic Hemiplegia
Asthma and Eczema	Congenital Ichthyosis
Cerebella Ataxia	Spasticity
Spastic Quadriplegia	Asthma
Encephalitis following Acute Rheumatism	
Aphasia	

It will be noted that 2 spina bifida cases were admitted during the year.

It will be seen, therefore, that the pattern for admission to the Physically Handicapped School remains as in the past recent years, firmly based on medical educational need.

### **Deaths of Schoolchildren**

It is distressing to have to record that 10 schoolchildren died during the year. Causes of death were as follows:—

Boys	Girls
Age 6—Cystic Fibrosis	Age 5—Staph. Septicaemia
„ 9—Multiple Injuries (road accident)	due to Staph. Osteomyelitis
„ 10 Medullablastoma	„ 7—Acute
„ 11 Lymphosarcoma	Glomerulonephritis
„ 14—Sarcoma of R. Femur	„ 13—Aplastic Anaemia associated with
„ 14—Bronchiectasis	Ethosuximide
„ 15—Medullablastoma	therapy

Although this number is higher than in recent years the increase is not statistically significant and should perhaps be considered in the light of the figures of some years ago.

1929—33	annual average	28
1934—38	„ „	29
1939—43	„ „	23
1944—48	„ „	11

### **Provision of Meals**

The figures for the provision of meals and milk on Page 40 are materially the same as in previous years.

### **Acknowledgement**

It is with pleasure that I record the continued interest and enthusiasm of all members of the School Health Service and of the Director of Education and his staff, both teaching and administrative. Without such help and co-operation the School Health Service could not be maintained.

The continued support of the members of the Committee has been as before, an encouragement throughout the year.

A handwritten signature in dark ink, reading "J. R. Murdoch". The signature is fluid and cursive, with a long horizontal stroke extending to the right from the end of the name.

*Principal School Medical Officer.*

Health Department,  
68 St. Giles' Street,  
Norwich, NOR 22E.  
Tel. No. Norwich 22233 Ext. 300.





# Annual Report of the Principal School Medical Officer

## (1) (a) STAFF OF THE SCHOOL HEALTH SERVICE (as at 31st December, 1969)

### MEDICAL STAFF

J. R. MURDOCK, (Mod.), B.A., M.D., D.P.H., D.C.H.  
Medical Officer of Health and Principal School Medical Officer

D. B. HILL, M.A., M.B., B.Chir., L.R.C.P., M.R.C.S., D.P.H.  
Deputy Medical Officer of Health and Deputy Principal School Medical Officer

R. M. BADMINTON, M.B., Ch.B., D.P.H., D.A., D.Obst. R.C.O.G.  
Medical Officer in Department

(3 vacancies)

### DENTAL OFFICERS

P. I. CHRISTENSEN, L.D.S., B.D.S.  
Principal School Dental Officer

J. M. MITCHELL, L.D.S., R.C.S.  
School Dental Officer

R. A. FELLA, B.D.S.  
School Dental Officer

(3 vacancies)

**(1) (b) SCHOOL HEALTH CONSULTANT SERVICES  
PROVIDED BY THE  
EAST ANGLIAN REGIONAL HOSPITAL BOARD**

*Cardiac Clinic:*

W. A. OLIVER, M.B.E., M.D., M.R.C.P.

*Ophthalmic Clinic:*

P. H. BEATTIE, M.D.(Aberdeen), D.O.M.S.(Eng.)

W. J. NAUNTON, M.A., M.R.C.S., L.R.C.P., M.B., B.Ch., D.O.M.S.

P. J. L. HUNTER, M.B., Ch.B., D.O.M.S.

*Otorhinolaryngic Clinic:*

Arrangements exist for the School Health Service to make appointments for  
MR. I. S. YOUNG, M.B., Ch.B.(Glasgow), F.R.C.S.(Edin.), D.L.O. and  
MR. R. J. SELICK, M.B., F.R.C.S. to see cases at their clinics.

## (2) GENERAL INFORMATION

The number of school children on the school register at the end of the year was 20,310 compared with 20,170 at the end of 1968. These figures include the numbers on the registers of the non-local education authority schools at which medical inspection is carried out by the authority.

The number of school departments in the city is as follows:—

### I. PRIMARY

Infants	20.	4232 children in attendance at end of year
Junior	17.	6055 children in attendance at end of year
Combined		
Junior and		
Infant	3.	893 children in attendance at end of year

### II. SECONDARY

Modern	10.	5060 children in attendance at end of year
Grammar		
(Mixed)	1.	693 children in attendance at end of year
Grammar		
(Boys)	1.	806 boys in attendance at end of year
Grammar		
(Girls)	1.	769 girls in attendance at end of year

At the year end there were some 581 boys in the senior and 79 in the junior department of the King Edward VI School, and 565 girls (seniors) and 179 girls and boys (juniors) at the Notre Dame School, both non-local education authority schools at which we carry out inspections.

### III. NURSERY SCHOOL AND CLASSES

Earlham Nursery

School	..	100 children in attendance at end of year
Nursery Classes		90 children in attendance at end of year

A number of children under 5 years of age were also attending other infant schools.

### IV. SPECIAL SCHOOLS

Physically Handi-  
capped and

Delicate Pupils		64 children in attendance at end of year
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Educationally

Sub - Normal

Pupils	..	144 children in attendance at end of year
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During the year the Junior and Infant sections of the St. John's School were separated under two Head Teachers instead of being combined under one as hitherto.

### (3) MEDICAL INSPECTION

The age-groups in which medical examinations of school children were carried out remain unchanged, the routine ones being four times during a child's school life.

The number of pupils examined at the Schools during the year, their physical condition, and the extent to which parents attended the periodic medical inspections at the schools was as follows:—

Age Groups Inspected (By Years of Birth)	No. of Pupils Examined	Percent- age of Exams at which Parents were present	Findings			
			Number of those whose Physical Condition Satisfac- tory	No. Requiring Treatment		
				For De- fective Vision	For all other Condi- tions	Total In- dividual Pupils
1965 and later ..	192	98.0	192	4	18	20
1964 ..	1109	97.3	1109	36	117	150
1963 ..	732	96.0	732	21	84	104
1962 ..	134	94.0	134	5	15	20
1961 ..	1297	89.0	1297	40	93	130
1960 ..	178	86.5	178	9	25	33
1959 ..	70	82.9	70	8	9	17
1958 ..	323	68.1	323	29	36	63
1957 ..	706	68.8	705	33	70	96
1956 ..	293	67.9	293	13	21	33
1955 ..	30	53.3	30	1	3	4
1954 and earlier ..	572	16.4	571	29	55	79
Total L.E.A. Schools	5636	79.5	5634 (99.96%)	228	546	749
Non-L.E.A. Schools	179	62.0	179 (100%)	10	17	26
Grand Total	5815	78.9	5813 (99.97%)	238	563	775

	L.E.A. Schools	Non-L.E.A. Schools
Number of Re-inspections ..	1508	54
Number of Special Inspections ..	920	6
Total ..	2428	60



**Defects found by Medical Inspection during the year ended  
31st December, 1969.**

[These Tables include separately the number of pupils found to require treatment (T) and the number of those pupils which it was found advisable to keep under medical observation (O)]

**Table A—Periodic Inspections at L.E.A. Schools**

De- fect Code No.	Classification of Defects and Diseases	PERIODIC INSPECTIONS							
		Entrants		Leavers		Others		Total	
		(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
4	Skin .. ..	42	37	24	9	80	39	146	85
5	Eye—								
	Vision .. ..	69	235	27	9	132	130	228	374
	Squint .. ..	34	16	—	1	9	8	43	25
	Other .. ..	7	7	—	2	2	8	9	17
6	Ear—								
	Hearing .. ..	7	121	—	1	3	99	10	221
	Otitis Media ..	5	73	1	11	2	24	8	108
	Other .. ..	1	7	1	1	—	1	2	9
7	Nose and Throat	26	98	3	10	16	67	45	175
8	Speech .. ..	16	23	—	—	6	6	22	29
9	Lymphatic Glands	—	22	—	—	1	7	1	29
10	Heart .. ..	3	15	2	4	4	18	9	37
11	Lungs .. ..	25	46	1	1	15	44	41	91
12	Developmental—								
	Hernia .. ..	6	18	—	3	2	7	8	28
	Other .. ..	15	137	6	29	30	222	51	388
13	Orthopaedic—								
	Posture .. ..	2	9	1	2	5	12	8	23
	Feet .. ..	15	29	—	35	19	33	34	97
	Other .. ..	15	56	1	8	6	35	22	99
14	Nervous System—								
	Epilepsy .. ..	1	3	2	1	5	4	8	8
	Other .. ..	2	23	—	1	10	18	12	42
15	Psychological—								
	Developmental	1	6	—	—	20	4	21	10
	Stability .. ..	13	113	2	—	48	79	63	192
16	Abdomen .. ..	1	13	2	—	—	11	3	24
17	Other .. ..	3	8	3	1	11	10	17	19

**Table B—Special Inspections  
at L.E.A. Schools**

De- fect Code No.	Classification of Defects and Diseases	Special Inspections	
		(T)	(O)
(1)	(2)	(3)	(4)
4	Skin .. ..	25	1
5	Eye—		
	Vision .. ..	51	5
	Squint .. ..	1	—
	Other .. ..	1	1
6	Ear—		
	Hearing .. ..	111	73
	Otitis Media ..	37	2
	Other .. ..	15	—
7	Nose and Throat	59	8
8	Speech .. ..	14	4
9	Lymphatic Glands	1	—
10	Heart .. ..	3	1
11	Lungs .. ..	6	2
12	Developmental—		
	Hernia .. ..	1	—
	Other .. ..	12	7
13	Orthopaedic—		
	Posture .. ..	3	—
	Feet .. ..	5	—
	Other .. ..	8	—
14	Nervous System—		
	Epilepsy .. ..	—	1
	Other .. ..	4	—
15	Psychological—		
	Developmental	32	4
	Stability .. ..	20	5
16	Abdomen .. ..	3	4
17	Other .. ..	4	4

**Table C—Inspections  
at Non-L.E.A. Schools**

Periodic Inspections		Special Inspections	
(T)	(O)	(T)	(O)
(5)	(6)	(7)	(8)
6	7	—	—
10	1	2	—
—	—	—	—
—	—	—	—
—	1	1	—
—	—	—	—
—	—	—	—
4	2	—	—
—	—	—	—
—	—	—	—
—	—	—	—
2	3	—	—
—	—	—	—
—	—	—	—
1	3	—	—
—	1	1	—
—	2	—	—
1	5	—	—
—	—	—	—
—	—	—	—
—	—	—	—
1	—	—	—
—	—	—	—
—	1	—	—
—	—	—	—
2	4	—	—

## (4) TREATMENT

### CHURCHMAN HOUSE CLINICS

A clinic is held by a School Medical Officer every Monday morning at Churchman House. This enables School Medical Officers to refer cases from medical inspection so that they can be followed up in more detail than is possible at a school medical inspection.

A special clinic for bed-wetters is also held weekly.

In addition, school children with minor ailments are seen each morning at headquarters by the School Nurse.

### ENURESIS CLINIC

The Enuresis Clinic for children who wet the bed is now firmly established as a necessary and worthwhile part of the School Health Service. The clinic is held weekly at the Health Department, and during the year 77 children were seen, children being referred mainly by family doctors, school medical officers and from hospital out-patient clinics.

The basis of treatment is the alarm unit which wakens the child as soon as he or she starts to wet the bed. In addition, a few simple rules and general advice on the attitude to be adopted towards the child are given to the parents. Children are examined at their first attendance at the clinic and, where it appears that further investigation is required, they are referred to the appropriate specialist with the consent of the family doctor.

During 1969, the alarm unit has been loaned to 59 children, and the following is a statistical summary for the year:—

Year of Birth and Sex		No. Discharged	No. Defaulted	No. Discontinued (Not Improved)	No. under Observation at Year End	Total
1964	M	—	—	—	1	1
	F	—	—	—	—	—
1963	M	5	—	—	—	5
	F	—	—	—	1	1
1962	M	3	—	1	3	7
	F	2	—	—	—	2
1961	M	5	—	3	2	10
	F	1	—	—	2	3
1960	M	7	—	1	4	12
	F	2	1	1	—	4
1959	M	3	—	1	1	5
	F	1	—	—	—	1
1958	M	2	—	1	1	4
	F	—	—	—	1	1
1957	M	5	—	—	1	6
	F	2	—	—	—	2
1956	M	2	—	—	1	3
	F	3	—	—	1	4
1955	M	2	—	—	—	2
	F	—	—	—	—	—
1954	M	1	—	1	1	3
	F	—	—	—	—	—
1953	M	—	—	—	—	—
	F	—	—	—	—	—
1952	M	—	—	—	—	—
	F	1	—	—	—	1
Totals	M	35	—	8	15	58
	F	12	1	1	5	19

The table above shows the results for the year under review. Some children respond to treatment in a matter of a week or so, some need to use the alarm for over a month before a cure is effected, and others we do not seem to be able to help at all, although in some



of these cases an improvement is obtained. From the table which follows below this latter is something of the order of 24%. Experience suggests that the primary bed-wetter, constantly wet and with no serious emotional disorder, is most likely to respond to the alarm which we have now been using since May, 1961. This is the child in whom bed-wetting is primarily a habit disorder, where for some reason training at the usual age has been ineffective.

Age at issue of Alarm	Dry	Improved	Not Improved
5	3	—	—
6	5	—	—
7	2	1	2
8	11	2	5
9	2	1	1
10	2	—	2
11	3	—	1
12	4	4	1
13	3	—	—
14	—	1	2
15 and over	1	—	—
Total	36 (61.0%) (27 boys 9 girls)	9 (15.3%) (8 boys 1 girl)	14 (23.7%) (11 boys 3 girls)

The table above records individual children who have used the alarm during 1969, of whom 8 boys and 3 girls had become dry after using the alarm on a previous occasion but later relapsed. Of these, 2 boys and 1 girl again became dry after the second issue, the condition of 1 boy was improved, and of 5 boys and 2 girls unimproved.

Also included are 3 boys and 2 girls who, having made little or no progress after using the alarm on a previous occasion, were given a further trial when older. Of these, 2 boys and 2 girls became dry after the second issue and the condition of 1 boy was not improved.

Enquiries made during the year of 46 children, three months after having discontinued using the alarm unit, revealed that 21 were still dry, 18 were wetting occasionally, and 7 were wet most

nights. In the case of the latter, further attendance at the clinic was invited.

In the case of 23 children, twelve months after ceasing to use the alarm unit, 18 were still dry and 5 were wetting occasionally.

DISTRICT MINOR AILMENT CLINICS

Weekly sessions are held at schools situated in various parts of the city.

The following is a summary of the defects treated:—

	(a) At Churchman House	(b) At District Clinics	(c) Others of which we know (e.g. General Practitioner, Hospital, etc.)	(d) Total
Ringworm of the Head	—	—	—	—
Ringworm of the Body	—	—	—	—
Impetigo .. ..	—	—	2	2
Scabies .. ..	15	—	1	16
Acne .. ..	2	—	13	15
Warts (excluding Plantar Warts) ..	19	54	28	101
Plantar Warts.. ..	202	348	18	568
Minor Injuries .. ..	4	49	—	53
Septic Sores .. ..	1	31	1	33
Other Skin Diseases ..	15	20	62	97
Blepharitis .. ..	—	—	2	2
Conjunctivitis.. ..	—	—	2	2
Other Minor Eye Defects .. ..	—	2	1	3
Otorrhoea .. ..	—	3	35	38
Other Ear Defects ..	2	—	29	31
Defects of Nose and Throat .. ..	—	—	29	29
Enlarged Glands ..	—	—	1	1
Other Defects.. ..	—	16	67	83

OPHTHALMIC CLINIC

Pupils suffering from defective vision or squint are referred to an Ophthalmic Surgeon by the School Medical Officers. Occasionally cases are referred by General Practitioners through School Health channels.

School Ophthalmic Clinics are held at the Out-Patient Department of the Jenny Lind Hospital in the charge of Dr. P. H. Beattie. Normally three sessions are held weekly, viz:—

Wednesday at 9.30 a.m. - Mr. P. J. L. Hunter  
Wednesday at 11.30 a.m. - Dr. P. H. Beattie  
Thursday at 9.15 a.m. - Dr. W. J. Naunton

Appointments are made through the School Health Service, but the dispensing of spectacles is arranged through the National Health Service.

As considered necessary by the Ophthalmic Surgeon, orthoptic treatment and investigation is carried out at the Norfolk and Norwich Hospital.

114 sessions were held on our behalf by the Ophthalmic Specialists during the year.

**Eye Diseases, Defective Vision and Squint**

	Number of Cases known to have been dealt with
External and other, excluding errors of Refraction and Squint .. ..	7
Errors of refraction (including Squint)	
(i) Pupils at L.E.A. Schools ..	991
(ii) Pupils at Non-L.E.A. Schools	53
Total ..	1051
Total number of pupils for whom spectacles were prescribed	
(i) Pupils at L.E.A. Schools ..	375
(ii) Pupils at Non-L.E.A. Schools	20

**CARDIAC CLINIC**

Facilities exist for the School Health Service to arrange for children to be seen at a Cardiac Clinic held by Dr. W. A. Oliver, M.B.E., under the aegis of the Regional Hospital Board.



During the year 56 school children (including 8 new cases) were examined and the following diagnoses were made:—

	New Cases	Old Cases
Atrial Septal Defect .. ..	—	5
Ventricular Septal Defect .. ..	1	12
Patent Ductus Arteriosus .. ..	—	1
Pulmonary Stenosis .. ..	1	7
Aortic Stenosis .. ..	—	5
Fallot's Tetralogy .. ..	—	4
Innocent Systolic Murmur .. ..	5	9
Coarctation of Aorta .. ..	—	3
Cardiomegaly .. ..	—	2
Scimitar Syndrome .. ..	1	—

52 of these children had no restriction placed on their physical activities and 4 were debarred from competitive sport.

DISEASES OF EAR, NOSE AND THROAT

(a) Treatment of Otitis Media

Children suffering from otitis media come to notice through various agencies, but chiefly through the School Medical Staff and Head Teachers.

When considered advisable, and with the approval of the family doctor, cases are referred for examination by the specialist at the Out-Patient Departments of the Jenny Lind and the Norfolk and Norwich Hospitals and treatment is continued or modified according to his findings.

32 new cases were referred to the Ear Specialist during the year, and 4 cases which had recurred.

3 children were treated at the Central Clinic at Churchman House, and 35 children are known to have been treated otherwise by general practitioners or hospital specialists.

The following table shows the number of cases known to us of otitis media in school children treated by the local authority and otherwise during the last ten years.



	(a) At Churchman House	(b) At District Clinics	(c) Others of which we know (e.g. General Practitioner, Hospital, etc.)	(d) Total
1969	—	3	35	38
1968	2	—	35	37
1967	1	4	24	29
1966	—	6	36	42
1965	—	3	24	27
1964	1	7	24	32
1963	—	11	19	30
1962	1	12	24	37
1961	—	14	31	45
1960	—	9	47	56

#### (b) Tonsillectomy 1962—69

The Jenny Lind Hospital tells us monthly of the children whose tonsils and adenoids were removed in the hospital.

The following are the yearly figures thus obtained:

1962	..	..	255	1966	..	..	318
1963	..	..	200	1967	..	..	254
1964	..	..	270	1968	..	..	237
1965	..	..	276	1969	..	..	234

The numbers and ages of the school children who had this operation in 1969 were as follows:—

Age	Boys	Girls	Total
4 Years	4	3	7
5 „	21	29	50
6 „	35	32	67
7 „	35	16	51
8 „	17	12	29
9 „	6	8	14
10 „	4	8	12
11 „	2	2	4
Total	124	110	234

**(c) Arrangements for the Ascertainment and Treatment of Children with Defective Hearing**

As before, the hearing of school children was checked as part of the routine school medical examination during the first year at school.

The rapid sweep method using a pure tone audiometer was employed.

Any children failing in this test are referred to one of the School Medical Officers for a further testing, and children of other ages about whose hearing ability there is any doubt, are similarly referred.

If the presence of deafness is confirmed, then arrangements are made (with the approval of the family doctor) for the child to be examined by an otologist.

The following table shows the number of children tested audiometrically during the year, and the results obtained:—

	Entrants
No. of children audiometrically tested at school by School Nurses .. .. .	1923
No. of children referred to School Medical Officer for further test .. .. .	184
No. referred from previous year .. .. .	9
No. of children found to be deaf on re-testing:	
—In both ears .. .. .	75
—In one ear only .. .. .	30
No. of children whose hearing was found to be within normal limits on re-testing	68
No. of children awaiting re-testing at end of year .. .. .	20
	Other Pupils Referred
No. of other children referred to School Medical Officer for testing .. .. .	154
No. of children found to be deaf on testing:	
—In both ears .. .. .	44
—In one ear only .. .. .	18
No. of children whose hearing was found to be within normal limits on testing ..	76
No. of children awaiting test at end of year ..	16

#### **(d) Special Classes for Partially Hearing Children**

Two Partially Hearing Units are established in Norwich to help those children most seriously handicapped by deafness. The Junior Unit attached to the Lakenham Junior School, opened in September, 1956, caters for such children between 7 and 11 years, and the Infant Unit opened in April, 1968, attached to Lakenham Infant School, is for the younger children.

All children in the Infant Section suffer from a serious hearing impairment. They wear individual body-worn hearing aids and, in addition, have been loaned stronger amplifiers with independent headsets and microphones which the parents are trained to use at home. Although the degree of deafness varies, all have communication problems, retarded language development and speech defects. The very necessary concentrated training available in the Partially Hearing Unit is already resulting in marked progress.

In both Units the aim is to give the benefit of specialised teaching, using modern technical aids within the socialising and stimulating environment of a normal hearing school, and every opportunity is taken to integrate the deaf children in the normal school activities.

At the end of the year 12 boys and 5 girls were in full-time attendance at these Units including 4 boys by arrangement with other Local Education Authorities.

Other children with known hearing defects, some of them using hearing aids, are visited from time to time at their local schools by the Teacher of the Deaf, or in the case of the very young child, at home. The early ascertainment and training of the very young deaf child, and their parents, is of vital importance. A late start (and that means later than 2 years of age) may result in a retardation of communication and a maladjustment which can never be overcome.

A Teacher of the Deaf also assists at the Consultants Clinic at the Jenny Lind Hospital. Infant and pre-school children may need to be seen at home several times, to be conditioned for diagnostic testing.



## Diseases and Defects of Ear, Nose and Throat

	Number of Cases known to have been dealt with
Received Operative Treatment—	
(a) for diseases of the ear .. ..	56
(b) for adenoids and chronic tonsillitis .. .. .	234
(c) for other nose and throat conditions .. .. .	17
Received other forms of treatment ..	98
Total ..	405
Total number of pupils in schools who are known to have been provided with hearing aids—	
(a) In 1969 .. .. .	5
(b) In previous years .. ..	47

## ORTHOPÆDIC TREATMENT

Children suffering from orthopædic defects are referred by the School Medical Officers from school medical inspections, school clinics, etc., and are seen (with the approval of the family doctor) by the Orthopædic Surgeons at their out-patients clinics at the Jenny Lind and Norfolk and Norwich Hospitals. The initial appointments are sent to the parents through the School Health Service and the Orthopædic Specialists report on all new cases seen. Treatment such as the supply of surgical boots and instruments, and the wedging of footwear, is arranged by the specialists through the Hospital Service.

19 children attending Primary Schools and 8 attending Secondary Schools were referred during the year as new cases, and 8 Primary School Children and 12 Secondary School Children continued treatment from the previous year.



The following table shows the diagnosis of the children seen by the Specialists:—

Diagnosis	New Cases attending		Old Cases attending		Total Cases attending	
	Prim-ary Schools	Second-ary Schools	Prim-ary Schools	Second-ary Schools	Prim-ary Schools	Second-ary Schools
Faulty Posture ..	3	3	—	2	3	5
Flat Foot .. ..	1	1	—	—	1	1
Pes Cavus .. ..	1	1	—	—	1	1
Intoeing .. ..	2	—	—	—	2	—
Genu Valgum ..	—	1	—	—	—	1
Spastic Paralysis ..	3	—	3	3	6	3
Spina Bifida .. ..	—	—	—	2	—	2
Pseudo Hypertrophic Muscular Paralysis	—	—	—	3	—	3
Osteochondritis ..	1	—	—	—	1	—
Congenital Disloca- tion of Hip Joint ..	—	—	1	1	1	1
Torticollis .. ..	1	—	—	—	1	—
Fractures etc. ..	2	2	—	—	2	2
Miscellaneous ..	5	—	4	1	9	1
Totals ..	19	8	8	12	27	20

Orthopædic and Postural Defects

	Number of Cases known to have been treated
(a) Pupils treated at clinics or out-patients departments .. ..	47
(b) Pupils treated at school for postural defects .. .. .	32
Total ..	79

## RINGWORM

No new cases of Ringworm of the Scalp were notified by the Hospital Authority during the year in children attending schools in Norwich.

## UNCLEANLINESS

Children at school are examined periodically for uncleanliness. Any child whose person or clothing is found to be in a verminous or filthy condition is immediately excluded from school (except in the case of a first offence where the condition is a very slight one), and a notice acquainting the parent of the position is posted on the same day.

This notification is followed up as soon as possible by a home visit from the Health Visitor who advises the parent on the best method of cleansing and endeavours to persuade any contacts to attend for examination.

A certificate of fitness has to be obtained either from the family doctor, or from the Medical Officer or Nurse at the nearest Minor Ailments Clinic before the child is permitted to return to school.

## Infestation with Vermin

(a) Total number of individual examinations of pupils in Schools by the School Nurses and other authorised persons .. .. .	52511
(b) Total number of individual pupils found to be infested:—	
(i) by School Nurses, etc. .. .. .	77
(ii) by Medical Officers .. .. .	Nil
(c) Number of individual pupils in respect of whom cleansing notices were issued:—	
(1) Under Section 54(2) of the Education Act, 1944 .. .. .	Nil
(2) Under Section 73 of the Norwich Corporation Act, 1933 .. .. .	5
(d) Number of individual pupils in respect of whom cleansing orders were issued under Section 54(3) of the Education Act, 1944 ..	Nil
(e) Number of individual pupils compulsorily cleansed under arrangements made by the Local Education Authority .. .. .	3
(f) Number of individual pupils cleansed at parents' request under arrangements made by the Local Education Authority .. .. .	42
(g) Number of individual pupils cleansed by parents .. .. .	32

Of the total school child population 0·38% were found during the year to have verminous heads.

No children were excluded on account of uncleanness of clothing during the year.

With a view to promoting cleanliness in the schools, 73 tubes of insecticidal hair preparation were issued during the year from the Department free of charge to parents.

## SPEECH THERAPY

At the end of the year two Speech Therapists were employed by the local Education Authority for a total of nineteen sessions weekly, a full-time Speech Therapist having been appointed in February to fill the vacancy which had existed since the previous August.

Cases are referred by the doctors from School Medical Inspections, School Clinics and Infant Welfare Centres; by the Health Visitors, the Head Teachers, and occasionally by Hospital Consultants and Family Doctors.

The following table shows the diagnosis of the 283 school children and 17 children under school age treated during the year:—

Diagnosis	No. of New Cases Treated	No. of Old Cases Treated	Total Cases Treated	% of all types of Cases Treated	Discharged as cured (by defect)	
					No.	%
Stammer ..	14	23	37	12·3	5	13·5
Cleft Palate ..	1	6	7	2·3	—	—
Spastic .. ..	—	2	2	0·7	—	—
Dyslalia ..	40	43	83	27·7	29	34·9
Nasal Speech ..	3	2	5	1·7	—	—
Delayed Speech	46	37	83	27·7	9	10·8
Sigmatism ..	20	20	40	13·3	18	45·0
Indistinct or fast Speech ..	3	6	9	3·0	5	55·5
Other .. ..	21	13	34	11·3	6	17·6

At the end of the year 179 cases were attending the Centres for treatment, and 90 other cases were under observation.

A total of 3,853 attendances were made at the Centres during the year by school children, and 186 by children under school age.

A close liaison exists between the Speech Therapist and Head Teachers, the Teacher for the Deaf, the Child Guidance Clinic and School Medical Staff.



## CHILD GUIDANCE

The Consultant Psychiatrist is Dr. C. D. Roberts.

During the year 101 Primary, 73 Secondary and 10 Special School children and 26 other children (under school age, private schools, etc.) were treated at the Clinic, which is held at premises formerly the Philadelphia Infant School, Aylsham Road.

138 clinics were held, the total number of attendances made being 3,225.

A break-down of the age-groups represented is as follows:—

Age-group	New Cases	Cases Carried Forward or re-referred	Total
Pre-School (2-5 years) .. .. .	12	3	15
Primary School (5-11 years) .. .. .	31	70	101
Secondary School (11-16 years) .. .. .	23	50	73
Special School (6-16 years) .. .. .	6	4	10
Others (Independent, Direct Grant and Boarding Schools, and late Adolescents) .. .. .	4	7	11
Total ..	76	134	210

The supervised transport arrangements inaugurated during the past year have led to a significant increase in the treatment of pre-school children. A total of 76 new cases were seen, having been referred from many different sources. An analysis of the sources of referral and the symptoms for which they were referred is given in the tables below:—

Source	No. of New Cases Referred
School Psychological Service (Teaching and Medical Staff, etc.) .. .. .	27
Parents and Guardians .. .. .	6
General Practitioners .. .. .	25
Hospital Consultants .. .. .	8
Juvenile Court .. .. .	3
Children's Officer .. .. .	5
Probation Officer .. .. .	1
N.S.P.C.C. ... .. .	1
	76

Reason for Referral	Boys	Girls	Total
Nervous Disorders (Fears, unsociability, moodiness, etc.) ..	4	5	9
Habit Disorders (Sleep, movement and speech disorders, incontinence, etc.) .. .. .	8	6	14
Behaviour Disorders (Beyond control, stealing, truancy, Unmanageableness, etc.) .. ..	27	12	39
Juvenile Delinquency .. .. .	4	—	4
Educational Difficulties (Daydreaming, school failure, etc.) ..	1	1	2
Diagnostic Assessment (Appraisal of subnormal behaviour, special placements, etc.).. .. .	5	3	8
	49	27	76

The greatest concentration of referrals was in the category of behaviour disorders, and many of these children reflect delinquency tendencies.

During the year the usual close liaison between the Clinic and the Juvenile Court was maintained and 24 cases were reported on for the information of the Magistrates. All Norwich children remanded to Bramerton Home are the subjects of reports by the Clinic staff.

The Clinic continues to operate on a basis of three half day sessions (Tuesday morning and afternoon and Friday afternoon) per week.

An average afternoon Clinic carries 30-35 children in treatment who are in an acute state of disturbance as well as new case interviews and continuous casework with parents and children.

The average attendance at the morning session is 20 children who are at “convalescent” stage in their treatment.

The Health Visitors attend the Clinic Conferences in rota, and the Speech Therapist also continues her long association with the Clinic.

During the year, the Clinic was also visited by a wide range of trainee staff including psychiatric juniors, psychiatric nurses, probation officers, teachers, Youth Employment and Child Care students.

## **(5) SCHOOL DENTAL SERVICE**

The Principal School Dental Officer reports:—

### **Dental Inspection and Treatment**

The aim of the School Dental Service is to provide a Dental inspection for each child in the local authority schools each year, and when possible two inspections a year at infant schools.

Treatment should follow when necessary including instruction in oral hygiene and dental health.

1967 was the last year when this aim was fulfilled. Since then due to the loss of dental staff, the number of children inspected dropped 33% in 1968 and 36% in 1969 based on the school population at the beginning of 1969.

Other treatment fell correspondingly in 1968 and again in 1969, except for extractions, the figure for which was almost the same for both these years. 2,003 teeth were extracted of which 383 were permanent teeth. Not a very bright reflection on the dental condition of the schoolchildren.

Probably this is only a small proportion of the number of teeth extracted for children by city dentists during the year.

It would seem that as people will not change their dietary habits, a measure such as the fluoridation of water supplies is the only way to reduce the enormous amount of pain and suffering caused by dental decay.

### **Dental Staff**

Mr. A. M. Wilson, School Dental Officer, left on 31st January to take up a more senior appointment. It had not been possible to fill this vacancy by the end of the year.

Two dental officers besides the chief officer were employed during the year and three dental surgery assistants.

Prosthetic and orthodontic work was sent to a dental laboratory in the city as in previous years.

### **Equipment**

During the year the following equipment was purchased:—

3 Dental Operating Lamps. One for Tuckswood Clinic and two for Unthank Road Clinic.

1 X-ray machine for use at Unthank Road.

3 Aspirators—one each at Tuckswood, Heartsease and Unthank Road Clinics.

### **Clinics**

The waiting room and passage floors at Unthank Road were tiled.



**Dental Inspection and Treatment carried out by the Authority during  
the year ended 31st December, 1969**

**(a) *Attendances and Treatment***

	Ages 5 to 9	Ages 10 to 14	Ages 15 and over	Total
First visit .. .. .	1498	893	73	2464
Subsequent visits .. .. .	1623	2056	99	3778
Total visits .. .. .	3121	2949	172	6242
Additional courses of treatment commenced .. .. .	92	37	2	131
Fillings in permanent teeth ..	1116	2338	157	3611
Fillings in deciduous teeth ..	1670	137	—	1807
Permanent teeth filled .. ..	868	2041	144	3053
Deciduous teeth filled .. ..	1499	127	—	1626
Permanent teeth extracted ..	79	276	28	383
Deciduous teeth extracted ..	1248	372	—	1620
General Anaesthetics .. ..	489	173	15	677
Emergencies .. .. .	101	57	6	164

Number of pupils X-rayed .. .. .	110
Prophylaxis .. .. .	196
Teeth otherwise conserved .. .. .	519
Number of teeth root filled .. .. .	—
Inlays .. .. .	—
Crowns .. .. .	2
Courses of treatment completed .. .. .	1864

**(b) *Orthodontics***

Cases remaining from previous year .. .. .	59
New cases commenced during year .. .. .	30
Cases completed during year .. .. .	7
Cases discontinued during year .. .. .	9
No. of removable appliances fitted .. .. .	30
No. of fixed appliances fitted .. .. .	—
Pupils referred to Hospital Consultant .. .. .	10



(c) *Prosthetics*

	5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time) .. .. .	—	—	—	—
Pupils supplied with other dentures (first time) .. .. .	3	9	3	15
Number of dentures supplied ..	3	11	3	17

(d) *Anaesthetics*

General Anaesthetics administered by Dental Officers 70

(e) *Inspections*

(a) First inspection at school	Number of pupils ..	11752
(b) First inspection at clinic.	Number of pupils ..	1195
	Number of (a)+(b) found to require treatment ..	8158
	Number of (a)+(b) offered treatment .. ..	5627
(c) Pupils re-inspected at school clinic..	.. ..	147
	Number of (c) found to require treatment .. ..	120

(f) *Sessions*

Sessions devoted to treatment .. .. .	1183
Sessions devoted to inspection .. .. .	132
Sessions devoted to Dental Health Education by School Dental Officers .. .. .	1

(g) *Children under 5 years of age who attend no school*

First visit .. .. .	72
Subsequent visits .. .. .	51
Total visits .. .. .	123
Additional courses of treatment commenced .. .. .	1
Fillings .. .. .	89
Teeth filled .. .. .	78
Teeth extracted .. .. .	52
General Anæsthetics .. .. .	19
Emergencies .. .. .	7
Number of patients X-rayed .. .. .	1
Prophylaxis .. .. .	—
Teeth otherwise conserved .. .. .	16
Courses of treatment completed .. .. .	41

(6) INFECTIOUS DISEASES  
INFECTIOUS DISEASES NOTIFIED, 1969

SCHOOL OR SCHOOL GROUP	Number on Roll at end of Year	Diphtheria			Scarlet Fever	Measles	Whoop- ing Cough	Food Poison- ing	Resp. T.B.	Non- Resp. T.B.	Dysen- tery	Jaundice	Ac. Polio- myelitis		
		Cases	Carriers	Contacts Excluded									Cases	Cases	
Alderman Jex ..	413	—	—	—	—	1	—	—	—	—	—	—	—	—	—
Angel Road ..	621	—	—	—	1	—	—	—	—	—	—	19	—	—	—
Avenue Road ..	636	—	—	—	8	—	—	—	—	—	—	2	—	—	—
Bignold ..	397	—	—	—	5	—	—	—	—	—	—	—	—	—	—
Blackdale ..	309	—	—	—	1	—	—	—	—	—	—	—	—	—	—
Bull Close ..	181	—	—	—	1	8	—	—	—	—	—	—	—	—	—
Catton Grove ..	712	—	—	—	5	—	—	—	—	—	—	1	—	—	—
Cavell ..	274	—	—	—	1	—	1	—	—	—	—	6	—	—	—
Clarkson ..	330	—	—	—	1	11	—	—	—	—	—	—	—	—	—
Colman Road ..	797	—	—	—	8	21	—	3	—	—	—	—	—	—	—
Crome/Stuart ..	255	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Earlham/Bluebell ..	966	—	—	—	—	—	—	—	—	—	—	—	—	—	—
George White ..	429	—	—	—	1	—	—	—	—	—	—	3	—	—	—
Gurney Henderson ..	802	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Heartsease ..	1480	—	—	—	5	—	—	—	1	—	—	—	—	—	—
Lakenham ..	1482	—	—	—	3	2	1	—	—	—	—	1	—	—	—
Larkman Lane..	677	—	—	—	3	1	—	—	—	—	—	—	—	—	—
Mousehold Avenue ..	191	—	—	—	1	2	—	—	—	—	—	—	—	—	—
Nelson Street ..	232	—	—	—	1	17	—	—	—	—	—	—	—	—	—
Norman and Dowson ..	1157	—	—	—	—	—	—	—	—	—	—	—	—	—	—
North Earlham ..	164	—	—	—	—	—	—	—	—	—	—	—	—	—	—
North Park ..	225	—	—	—	3	—	—	—	—	—	—	—	—	—	—
St. Augustine's..	240	—	—	—	—	—	—	—	—	—	—	—	—	—	—
St. John's ..	400	—	—	—	1	4	—	—	—	—	—	—	—	—	—





Amongst children attending Private Schools 2 cases of Scarlet Fever and 1 of Jaundice were notified.

In addition 1 case of Dysentery and 1 of Scarlet Fever were notified among city children attending county schools.

### **B.C.G. Vaccination**

B.C.G. Vaccination was again offered to all 13-year-old school children, and older school children not already vaccinated.

77.61% (75.8% in 1968) parents of 13-year-old children gave their consent.

The findings during the year were as follows:—

	No.	Heaf Tests Positive	%	No. Vaccinated with B.C.G.
13-year-old children	664	22	3.5	606
Older school children	630	24	4.0	572

The positive reactors were referred to the Consultant Chest Physician.

### **Tuberculin Testing of School Entrants**

During the year Heaf tests have continued to be carried out at the time of the first routine school medical inspection, of all entrants to Infant Schools whose parents have given written permission for this to be done.

The parents are informed by letter of the result, and particulars of those children who are positive reactors are given to the Chest Physician for following-up.

The number of tests carried out during the year and the results obtained were as follows:—

No. of Entrants Examined	No. Heaf Tested	No. whose parents declined	No. of Negative Reactors	No. of Positive Reactors	No. absent at time of Reading
2035	1583	452	1514	59	10

Of the 59 children who gave positive reactions 35 were from families already known to the Chest Physician, having previously had B.C.G. vaccination, and 24 were found to be normal after investigation.

### **Poliomyelitis Vaccination**

During the year 73 school children were given a course of 3 doses, and 1401 were given the fourth dose. Oral vaccine was used.

### **Measles Vaccination**

Measles vaccination was continued in 1969 but there was a shortage of vaccine for most of the year.

The age-groups dealt with were:—

Year of Birth:	1969	1968	1967	1966	1962-5	Others under 15	Total
No. Vaccinated:	—	106	181	113	171	341	912

## **(7) HANDICAPPED PUPILS**

The following table shows the number of boys and girls in each category, and the type of school at which each was in attendance in December, 1969.

Pupils suffering from more than one handicap have been classified under the major handicap.



Category	Handicap	At Special School				At Ordinary School		At Home		Total	
		Residential		Day		Boys	Girls	Boys	Girls	Boys	Girls
		Boys	Girls	Boys	Girls						
A	Blind Pupils .. ..	—	—	—	—	—	—	—	—	—	—
B	Partially Sighted Pupils .. ..	2	—	—	—	—	—	—	—	2	—
C	Deaf Pupils .. ..	1	1	—	—	—	—	—	—	1	1
D	Partially Hearing Pupils .. ..	2	1	2	1	68a	48a	—	—	72	50
E	Educationally Sub-normal Pupils .. ..	3	—	74	59	12b	5b	5	4	94	68
F	Pupils suffering from Severe Epilepsy .. ..	—	1	—	1	3	5	—	—	3	7
G	Maladjusted Pupils .. ..	2	1	1	1	2c	1	—	—	5	3
H	Physically Handicapped Pupils .. ..	1	—	14	10	1	1	4e	3e	20	14
I	Pupils suffering from Defective Speech .. ..	—	—	1	—	89	41	—	—	90	41
J	Delicate Pupils .. ..	1	—	12f	9	—	1d	1e	1e	14	11
	Total ..	12	4	104	81	175	102	10	8	301	195

- (a) Insufficiently deaf to require education at a Special School. Includes 8 boys and 5 girls attending Special Class for Partially Hearing Pupils.
- (b) Includes 10 boys and 3 girls on waiting list for admission to Special School of appropriate type.
- (c) At Hostel for Maladjusted Children.
- (d) At Hostel for Diabetic Children.
- (e) Being taught by the Visiting Teacher.
- (f) Includes 1 boy on register of special day school, but temporarily being taught by the Visiting Teacher at the end of the year.

(a) RESIDENTIAL SPECIAL SCHOOLS

The following table shows the Residential Special Schools, Hostels, and Hospital Special Schools at which Norwich children were in attendance in December, 1969:—

Handicap	No. of Norwich Pupils in attendance at end of year		Name of Special School or Hostel
	Boys	Girls	
Blind .. ..	—	—	—
Partially Sighted	2	—	E. Anglian School, Gorleston.
Deaf .. ..	—	1	E. Anglian School, Gorleston.
	1	—	Royal School for the Deaf, Derby.
Partially Hearing	2	—	Tewin Water School, Welwyn, Herts.
	—	1	Ingfield Manor School, Billingshurst, Sussex.
Educationally Sub-normal ..	1	—	Besford Court School, Worcester.
	1	—	Ashley Downs School, Lowestoft, Suffolk.
	1	—	St. John's School, Kemp Town, Brighton, Sussex.
Epileptic .. ..	—	1	Lingfield School, Surrey.
Maladjusted ..	1	—	Royal Russell School, Croydon, Surrey.
	1	—	Heanton School, Barnstaple, Devon.
	—	1	All Hallows School, Ditchingham, Norfolk.
	1	—	Colne Cottage Hostel, Norfolk.
	1	—	Morley Hall Hostel, Norfolk.
Physically Handicapped ..	1	—	Thomas de la Rue School.
Defective Speech	—	—	—
Delicate .. ..	1	—	Eden Hall, Bacton, Norfolk.
	—	1	Curruthers Corfield House.

(b) DAY SPECIAL SCHOOLS

**Educationally Sub-normal Pupils**

These are accommodated at the Parkside Special School for Educationally Sub-normal Pupils.

46 new cases were mentally examined during the year and 2 re-examinations were made. The following tables show the sources from which the new cases were referred, and the recommendations which were made:—

New cases examined mentally .. .. .	46
Source: Head Teachers .. .. .	41
School Health Service .. .. .	3
Hospital Consultant Staff .. .. .	2
Re-examinations .. .. .	2

	Boys	Girls
Recommendations, following examination:		
Special Day School (E.S.N.) .. .. .	23	12
Special Day School (P.H.) .. .. .	—	2
Re-examination later (ordinary school mean-time) .. .. .	3	3
Re-examination later (unfit for school mean-time) .. .. .	1	2
Unsuitable for Education at School (For Junior Training Centre) .. .. .	—	2

In addition 15 boys and 8 girls already attending Special (E.S.N.) Schools were brought forward for special examinations, and the following recommendations were made:—

	Boys	Girls
Community Care .. .. .	12	5
Fit for Employment .. .. .	2	1
Unsuitable for Education at School .. .. .	1	2

### Physically Handicapped and Delicate Pupils

Pupils who require special educational treatment because they are physically handicapped or delicate are admitted to the Day Special School at Colman Road, known as The Clare School.

	Boys	Girls
Number on Register at beginning of year .. ..	31	22
Number admitted during the year .. .. .	9	6
Number left during the year .. .. .	10	6

	Boys	Girls
Fit for ordinary school ..	2	2
Left the City .. ..	1	—
Left School for Employment .. .. .	4	3
Transferred to E.S.N. Special School .. ..	1	—
Transferred to Tutorial Centre .. .. .	—	1
Deceased .. .. .	2	—

Number on Register at end of year .. .. 30 22 = 52

Also 5 boys and 7 girls by an arrangement with Norfolk County Education Authority. + 12

Disease or Disability for which admitted	Boys	Girls
1. Respiratory.		
Asthma .. .. .	5	5
Bronchiectasis .. .. .	—	1
2. Orthopædic.		
Arthrogryphosis .. .. .	—	1
Other .. .. .	2	—
3. Nervous System.		
Cerebral Palsy .. .. .	3	3
Spina Bifida .. .. .	2	2
Epilepsy .. .. .	—	1
Muscular Dystrophy .. .. .	3	—
Hydrocephalus .. .. .	1	—
Cerebella Ataxia .. .. .	1	—



#### 4. Other.

Unsatisfactory General Condition ..	2	2
Congenital Defects .. ..	3	1
Behaviour Problems .. ..	2	1
Speech Defect .. ..	1	—
Partially Hearing .. ..	—	1
Haemophilia .. ..	2	—
Heart Disease (Congenital) .. ..	1	3
Transverse Myelitis .. ..	—	1
Ectopic Bladder .. ..	1	—
Delicate (resulting from Galactosaemia)	1	—
	—	—
	30	22
	—	—

#### (c) HOME TUITION

Handicapped pupils who, in consequence of their disability, have to be taught in their own homes by the Visiting Teachers are examined periodically during the year by a Medical Officer.

In November, 1955, the Education Committee agreed to develop this work in various ways, including the payment of regular visits to the Jenny Lind Hospital for Children, and the Burns Ward of the West Norwich Hospital, by the Teachers.

Children absent or likely to be absent from ordinary school, and at home for a month or more with injuries or non-infectious illness are also considered with a view to home tuition.

At the end of the year 6 boys and 4 girls were being taught in their homes by these Teachers. They were suffering from the following defects:—

**Boys:** Fracture of Skull (road accident); Scoliosis (post-operative); Septic Arthritis of Hip; Calcification of Femur; Encephalitis following Acute Rheumatism; Chronic Nephritis.

**Girls:** Multiple Injuries (road accident); Fracture of Femur; Post-Meningitis; Acute Rheumatism.

In addition 8 boys and 5 girls were taught in their homes for short periods during the year. They suffered from the following defects:—

**Boys:** Osteomyelitis; Medullablastoma (post-operative); Sarcoma Right Femur; Rheumatic Fever; Haemophilia; Bronchiectasis; Upper Respiratory Infection; Gross Maladjustment.

**Girls:** Head Injury (road accident); Slipped Left Femoral Epiphysis; Asthma; Gross Maladjustment (2 girls).

## (8) DEATHS OF SCHOOL CHILDREN

There were ten recorded deaths of children of school age compared with two in the previous year. The causes of death were:—

### Boys:

Aged	6 years	Cystic Fibrosis.
„	9 „	Multiple Injuries (Road accident).
„	10 „	Medullablastoma.
„	11 „	Lymphosarcoma.
„	14 „	Sarcoma of Right Femur.
„	14 „	Bronchiectasis.
„	15 „	Medullablastoma.

### Girls:

Aged	5 years	Staph. Septicaemia due to Staph. Osteomyelitis.
„	7 „	Acute Glomerulanephritis.
„	13 „	Aplastic Anaemia associated with Ethosuximide therapy.

## (9) PROVISION OF MEALS

Mid-day meals are provided by the Local Education Authority to all school children whose parents request these. From time to time the School Medical Officers also put forward cases where they think meals would particularly benefit.

School milk is no longer supplied to pupils in grant-aided Secondary Schools, but the quantity of milk per pupil in Primary Schools is maintained as far as possible at one-third of a pint per day. At the Clare Special School for Physically Handicapped Children two-thirds of a pint daily is supplied free.

The percentage of children in school having school meals is 61·5 and 52·2% of the total school population (or 84·7% of eligible children) take milk, but these figures mean very little because there is a wide spread between the ages and the two sexes. Unfortunately figures by age and sex are not readily available.

The Welfare Foods Scheme inaugurated on 1st August, 1947, by the Ministry of Food, provides that one pint of milk daily at reduced price should be available from registered suppliers all the year round for children between the ages of 5 and 16 who are unable by reason of disability of mind or body to attend school.

A number of invalid children under the Visiting Teacher have availed themselves of this scheme during the year.

## **(10) HOME VISITING**

The follow-up arrangements by the Health Visitors, etc., have not been altered during the year. 437 home visits were paid by the Health Visitors in respect of children who had been advised to have medical treatment.

439 children were involved in 167 families referred during the year to the National Society for the Prevention of Cruelty to Children. Of these, 147 children involved in 61 families were referred by the Local Authority.

## **(11) FOOD HYGIENE**

Every care is taken by the School Meals Staff of the Education Department to bring to the notice of their Kitchen Staff the importance of maintaining a very high standard of hygiene. They are also encouraged to report any significant illness.

During the year 181 entrants to the School Meals Staff were medically screened.

As a precautionary measure, food samples are kept for 48 hours after each meal.

## **(12) EXAMINATION OF TEACHERS, ETC.**

At the request of the Chief Education Officer 116 students, prior to commencing at teacher training college, were medically examined during the year, and 232 newly appointed teachers had a recent chest X-ray report, and where necessary, a full medical examination.

## **(13) EMPLOYMENT OF CHILDREN**

Byelaws governing the employment of school children provide that within 14 days from the date when employment begins, a certificate from the Principal School Medical Officer has to be produced to and endorsed by the employer, certifying that such employment will not be prejudicial to the health or physical development of the child, and will not render him unfit to obtain proper benefit from his education.

During the year 396 examinations were carried out under these byelaws.











